



### COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL DESIGN NATIONAL STAGE OF PCT SUPPLEMENTAL

DIVISIONAL, CONTINUATION OR C-I-P)
As a below named inventor, I hereby declare that:
TYPE OF DECLARATION
This declaration is of the following type:
(check one applicable item below)
x original.
design.
supplemental.
NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continuation-in- part application, do <u>not</u> check next item; check appropriate one of last three items.
national stage of PCT.
NOTE: If one of the following 3 items apply, then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR C-I-P.
divisional.
continuation.
continuation-in-part (C-I-P).
INVENTORSHIP IDENTIFICATION
WARNING: If the inventors are each not the inventors of all the claims, an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.
My residence, post office address and citizenship are as stated below, next to my name. I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed, and for which a patent is sought on the invention entitled:
TITLE OF INVENTION
A method for filtering digital images, and a filtering device



#### SPECIFICATION IDENTIFICATION

 $(complete\ (a),\ (b),\ or\ (c))$ 

(a) is attached hereto	
(b) x was filed on 19 January 2001 as x Serial No. or Express Mail No., As Serial No. not yet known	09/766,238
and was amended on	(if applicable).
NOTE: Amendments filed after the original papers are deposited with the PTC filing date by being referred to in the declaration. Accordingly, the a application papers or, in the case of a supplemental declaration, encompassed in the original statement of invention or claims. See 37 C	mendments involved are those filed with the are those amendments claiming matter not
(c) was described and claimed in PCT International Application, filed on	
amended under PCT Article 19 on	and as (if any).
ACKNOWLEDGEMENT OF REVIEW OF PAPERS	AND DUTY OF CANDOR
I hereby state that I have reviewed and understand the contents of including the claims, as amended by any amendment referred to all	<del>_</del>
I acknowledge the duty to disclose information, which is matericated Code of Federal Regulations, § 1.56,	ial to patentability as defined in 37,
(also check the following items, if de	esired)
and which is material to the examination of this application is a substantial likelihood that a reasonable Examiner woul whether to allow the application to issue as a patent, and in compliance with this duty, there is attached an inform accordance with 37 CFR 1.98.	d consider it important in deciding
PRIORITY CLAIM (35 U.S.C § 11	9(a)-(d))
I hereby claim foreign priority benefits under Title 35, United Sta application(s) for patent or inventor's certificate or of any PCT in at least one country other than the United States of America li below any foreign application(s) for patent or inventor's c application(s) designating at least one country other than the Unithe same subject matter having a filing date before that of the claimed.	ternational application(s) designating sted below and have also identified ertificate or any PCT international ted States of America filed by me on
(complete (d) or (e)	
(d) no such applications have been filed.	
(e) x such applications have been filed as follows.	
NOTE: where item (c) is entered above and the International Application which check item (e), enter the details below and make the priority claim.	th designated the U.S. itself claimed priority

# PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119(a)–(d)

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
Finland	20000141	24 January 2000	x YES NO
Finland	20000122	21 January 2000	x YES NO
			YES NO
			YES NO
			YES NO

## CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S) (34 U.S.C. § 119(e))

I hereby claim the benefit under Title 35, United States Code, sprovisional application(s) listed below:	§ 119(e) of any United States
PROVISIONAL APPLICATION NUMBER	FILING DATE
1	
/	

## CLAIM FOR BENEFIT OF EARLIER US/PCT APPLICATION(S) UNDER 35 U.S.C. 120

The claim for the benefit of any such applications are set forth in the attached ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CONTINUATION-IN-PART (C-I-P) APPLICATION

# ALL FOREIGN APPLICATION(S), *IF ANY*, FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

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NOTE:	basis for this application continuation-in-part, the	on entering the United Si hen also complete ADDI ISIONAL, CONTINUATI	com the filing date of this application is a PCT filing forming the tates as (1) the national stage, or (2) a continuation, divisional, or ED PAGES TO COMBINED DECLARATION AND POWER OF ON OR C-I-P APPLICATION for benefit of the prior U.S. or PCT
		POWER (	OF ATTORNEY
		ing attorney(s) and/o Frademark Office co	r agent(s) to prosecute this application and transact all nnected therewith.
		(list name and	registration number)
	ce A. Green . Harrington	(24,622) (31,686)	
		(check the follow	ving item, if applicable)
	•		power of attorney, is the authorization of the follow instructions from my representative(s).
SEND	CORRESPONDEN	СЕ ТО	DIRECT TELEPHONE CALLS TO: (Name and telephone number)
Clarence	ce A. Green		Clarence A. Green
	& Green, LLP		(203) 250–1800
	st Road d, CT 06430		

#### **DECLARATION**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

#### SIGNATURE(S)

A	11	37	rr.

Carefully indicate the family (or last) name, as it should appear on the filing receipt and all other documents.

Full name of sole	e or first inventor			
Jani		Lainema		
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)		
Inventor's signature				
Date	22 March 2001 Country of Citizenship	Finland		
Residence	6219 Love Drive, Apt. 2226, Irving, TX 75039, USA			
Post Office Address	6219 Love Drive, Apt. 2226, Irving, TX 75039	, USA		
	_			
Full name of sec	ond joint inventor, if any			
Bogdan-Paul		Dobrin		
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)		
(OIVER RAME)	(MIDDLE INTIAL OR NAME)	TAMILI (OK LAST NAML)		
Inventor's signature	Blein			
Date	20 March 2001 Country of Citizenship	Romania		
Residence	Iso-Roobertinkatu 8 B 12, FIN-00120 Helsink			
Post Office Address	Iso-Roobertinkatu 8 B 12, FIN-00120 Helsink			
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	<del></del>			
	rd joint inventor, if any			
Full name of thi Marta	rd joint inventor, if any	Karczewicz		
	rd joint inventor, if any  MIDDLE INITIAL OR NAME	Karczewicz FAMILY (OR LAST NAME)		
Marta	MIDDLE INITIAL OR NAME			
Marta	MIDDLE INITIAL OR NAME  Karveur or	FAMILY (OR LAST NAME)		
Marta (GIVEN NAME)	MIDDLE INITIAL OR NAME  **Conversion of Citizenship**  22 March 2001 Country of Citizenship**	FAMILY (OR LAST NAME) Poland		
Marta (GIVEN NAME) Inventor's signature	MIDDLE INITIAL OR NAME	FAMILY (OR LAST NAME)  Poland  USA		

(check proper box(es) for any of the following added page(s)
that form a part of this declaration)

| Signature for fourth and subsequent joint inventors. Number of pages added
| \* \* \* \*
| Signature by administrator(trix), executor(trix) or legal representative for deceased or
incapacitated inventor. Number of pages added
| \* \* \* \*
| Signature for inventor who refuses to sign or cannot be reached by person authorized
under 37 CFR 1.47. Number of pages added
| \* \* \* \*
| Added page for signature by one joint inventor on behalf of deceased inventor(s) where legal
representative cannot be appointed in time. (37 CFR 1.47)
| \* \* \* \*
| Added pages to combined declaration and power of attorney for divisional, continuation, or
continuation-in-part (C-I-P) application. | Number of pages added
| \* \* \* \*
| Authorization of attorney(s) to accept and follow instructions from representative.
| \* \* \* \*

x This declaration ends with this page.